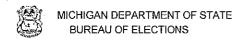
COVER PAGE

FOR OFFICIAL USE ONLY

COVER PAGE			
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 8 25 08 to 10 19 68		
1. Committee I.D. Number	Candidate Last Name First Name M.I.		
150510	Rivard Michael G. 4a. Office Sought Including District # or Community Served (If applicable)		
2. Committee Name The Committee to Elect Mike Rivard for Roads	Bay County Road Commission		
Mike Rivard for Roads	4b. County of Residence Bay		
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address		
840 N. Garfield Rd	Michael G Rivard		
Linwood, MI 48634	840 N. Garfield Rd		
Area Code and Phone 989-879-5785	Linwood, MI 48634		
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone 989-979-5485		
7. Treasurer's Business Address	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)		
840 N. Garfield Ra			
Linwood, MI 48634			
l	mary of the state		
Area Code and Phone	Area Code and Phone		
9, TYPE OF STATEMENT	1		
9a. Pre-Election OR 9b. Post	-Election 9c. Annual Statement (Coverage Year)		
Pre-Election or Post-Election Statement relates to:	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)		
Primary	eral 9e. Dissolution of Candidate Committee		
Convention	ool Effective Date of Dissolution		
Special	YIS .		
	By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if		
Date of Election, Convention or Caucus November 4, 2008	the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule		
	1B and the Summary Page.		
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.			
 Verification: I\We certify that all reasonable diligence was used i my\our knowledge and belief the contents are true, accurate and co 	n the preparation of this statement and attached schedules (if any) and to the best of mplete.		
Current Treasurer or AA ()			
Pesignated Record keeper I Chacles Rivard Nuture Revenue Date 10/24/08 Type or Print Name Signature			
Type of First Name			
candidate Michael G. Rivard	1 Mphred X Date 10/24/08		
Type or Print Name	Signature		

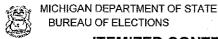


1. Committee I.D. Number <u>150510</u>

SUMMARY PAGE CANDIDATE COMMITTEE

The Committee to Elect Mike Rivard for 2. Committee Name Roads

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>2265.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c) \$ <u>2265.00</u>	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4) \$ <u>82.56</u>	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 2347.56	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES	~ ~ ~	
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>35.00</u>	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>2397.75</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>2397.75</u>	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _ L	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		(24.) φ
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>3000.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ /	
	BALANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>376.85</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.)+ \$2347.56	
	(15.) = \$ 2724.41	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.)- \$ <u>2397.75</u>	
(Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>326.46</u> *	

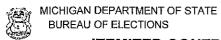


CANDIDATE COMMITTEE

1. Committee I.D. Number

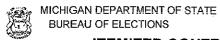
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he Committee to Elect Mike Rivard for Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? 4. Date of Receipt Name & Address: Larry Patty Wiley 2232 S. Wakeley Bridge Rd Grayling Tup, MI 5. If over \$100.00 comulative, please provide: Click Here for Memo Itemization Occupation Employer_ Business Address Type of Contribution: Direct Fund Raiser Loan from a person 3. Contribution #2 PAC Receipt? 4. Date of Receipt Name & Address Robert + Sue Bloenk 1111 N. Water Street, Ste 208 Bay City, MI 48708 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_ Business Address __ Type of Contribution: | | Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 9112108 Name & Address: Vansumeran, Nina 889 Shady Shore Drive Bay City, MI 48 706 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer_ Occupation **Business Address** Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? 4. Date of Receipt Q 1alo8 Name & Address Meylan, Ed 1161 5.8-Mile $_{\rm s} \lambda n \infty$ Kawkawlin, M. 48631 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation. Employer _ Business Address Type of Contribution: | | Direct Fund Raiser Loan from a person 5.00 Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on line 3a of Summary



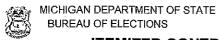
1. Committee I.D. Number _	150510	
The Committee	ce to Elect	Mike Rivard for
2. Committee Name		- hond e

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt G 12 08 Name & Address: Niederer, Nelson 5402 Elmview Dr. Bay Ctty MI 48706 5. If over \$100.00 cumulative, please provide:	<u>\$20.∞</u>	\$
Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	Click Here fo	or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/12/08 Name & Address HeInz, Bob + Mary 5754 Michael Bay Cuty, M 48706 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	s 40.00 Click Here fo	\$r Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9 12 08 Thompson, Rick+Lesie THIT 7-Mile Rd Freedand, Mi 48 6 23 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>60</u> . Click Here for	\$ Memo Itemization
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9 12/08 HORN, Bob HI4 Nebob 15h Bay City, MI 48708 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$20.00 Click Here for	\$ Memo Itemization
Business Address		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



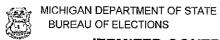
1. Committee I.D. Number 150510	
The Committee to Elect	Mike Kivard for
2. Committee Name	——Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 9/12/08 Reinhardt, Keith 7261 Kara	0.6.00	
Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:	\$30.00	\$
Occupation Employer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: X Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 912/08 Name & Address		
Rice, Harry 7261 Kara Bay City, M1 43706	\$ <u>20.00</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		į
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/12/08 Name & Address: Hartley, Terry 2319 E. Freeland Rd Freeland, M1 48623	\$ <u>20.00</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9 12/08	-	
Lance, Matt Po Box 426 Bay Cety, MI 48706	\$20.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	OROK FIGIC 101	Wichio Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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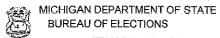
1. Committee I.D. Number _	1000	0	
The Committee Name	ttee to	ElectMike	Rivard for

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 9 12 08		
Rivard, Robert + Suzanne		
1498 W. anderson Rd	1	·
Linwood, MI 48634	s40.00	s
5. If over \$100.00 cumulative, please provide:	*	
Occupation Employer	Click Here for	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person K Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 91208		
Name & Address		
Harnden, Mark	~ ^ C	
3753 Garfield Rd	\$ <u>₽0.∞</u>	\$
Auburn, MI 48611		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 91208 Name & Address:		
Poirier, Dennis		!
1265 Orchard Rd	*30.00	\$
Essexville, MI 48732		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/12/08 Name & Address		
Gorney, Bob & Pat 886 N. Garfield		
	s 40.00	
Linwood, MI 48634		2
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
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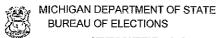
1. Committee I.D. Number	<u> 120210</u>		
The Commit		14 14 3	Rounard for
2. Committee Name	· to Elect	Mikes	Kivard for

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 91208 Name & Address: Blgick, Vaughn + Marg 5353 Lorraine Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Employer	s 40.00 Click Here fo	\$or Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9 12 08 Name & Address SIMSTAD, Ed		
3318 Broad more Dr. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:	\$ OD OD Click Here for	\$or Memo Itemization
Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/12/08 Name & Address: SIMSTAD, MIKE 3318 Broad more Drive Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	\$20.00 Click Here for	\$ Memo Itemization
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9 12 08 Claza, Rich + Carol 3036 Glenway South Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Employer Type of Contribution: Direct Loan from a person Fund Raiser	\$ 40 00 Click Here for	\$ Memo Itemization
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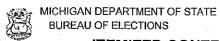
1. Committee I.D. Number	(20210	
The Committee Name	æ to Elect	Mike Rivard for

	-
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Pomaville, Louis 2585 N. Euclid Bay Late, Mi 48706 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: \[\begin{align*} Direct	SUICK Here for Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/12/08 Name & Address Van Sumeran, Becky 889 Shady Shore Bay Cety, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation	s⊇0.∞ \$
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 912/08 Name & Address: SIMStad, Marci 3318 Broad more Dr. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Employer Type of Contribution: Direct Loan from a person Fund Raiser	\$ 20.00 \$ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/12/08 Steinhoff, Joanne 301 State Street Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:	\$ 20.00 \$ Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
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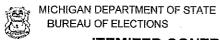
The Committee to Elect Mike Rivard for 2. Committee Name	W

	rtuaq
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/12/08 Name & Address: Obermiller, Abbie 840 N. Garfield Rd Linwood, Mi 48634 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/12/08	sale of receipt) \$\int(\text{Click Here for Memo Itemization})\$
Name & Address Niemann, Rich & Lois HOBI Richlyn Ct. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$SClick Here for Memo Itemization
Business Address	
3. Contribution #3 Name & Address: AINSIE, Receipt? YES 4. Date of Receipt 9/12/08 AINSIE, Rex + Marge 405 Patricia St. Auburn, MI 48611 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Tund Raiser	\$ 40.00 \$ Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9 12 08 Nagy, Roger & Vickie 1835 EN Boutell Lin Wood, MI 48634 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 70 00 \$ Click Here for Memo Itemization
Type of Contribution: Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary
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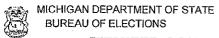
1. Committee I.D. Number	150510		
The Committee Name	ee to Elect	Mike Rivard for	W
		RAG	14

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 9 12 08 Name & Address: Glorgis, Sarah Lincoln St.		
Bay City, M1 48708	:30, ₀₀	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	Ollok Flore R	or memo itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	1 	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9 13 08 Name & Address		
Jonas, Diane		
2967 Sunny Blach Dr. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:	\$ <u>30.55</u>	\$
Bay City, MI 48706		
	Click Here to	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 Name & Address: PAC Receipt? YES 4. Date of Receipt 9 12 08	·	
Niemann, Dave+Amanda 181 River Trail	· 90 00	·
181 Kiver Irail	<u>\$ 0 </u>	\$
Bay Ctty, MI 48706 5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 91208		
Reinte, Carole Oakdale Drive	500 00	
Bay Cuty, M (4870 6 5. If over \$100.00 cumulative, please provide:	<u> </u>	5
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		•
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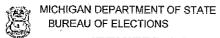
1. Committee I.D. Number _	120210		
The Committee	ze to Elect	Mike Rivard	For
2. Committee 14ame 17			

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/12/08 Name & Address:		
Niemann, Tom		
4058 Allen Ct	200	
Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:	\$ <u>0.9</u>	\$
$oldsymbol{1}$	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9 12 08 Name & Address		
Crook, Del + Sandy		
Crook, Del + Sandy 3052 Melrose	s 40.00	s
Bay City, MI 48706	·	· · · · · · · · · · · · · · · · · · ·
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9 12 08 Name & Address:		
Loehr, Jack+Sue		
3025 Crustwood Ct	\$ 40.00	\$
Bay City, M1 48706		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person T Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 0 12/08		
Rivard, Marie 1947 BentleyRd	-2n €	
Bentley, MI 48613	\$CY().	\$
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization
Occupation Employer	Olick Liele IO	Werlio Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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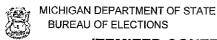
1. Committee I.D. Number	1505	510	
The Committee Name	e to	Elect	Mike Kivard

				101 100
Enter contributor's name and address. If middle initial. Check box to indicate if con Committee (PAC) Report all contributions	tribution is from a Politica	dividual, enter last name, first name, al Committee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date	of Receipt 9/12/08		
Werth, Ton	ng Jeanne			,
900 German	ia		\$80.00	
Bay City, MI 5. If over \$100.00 cumulative, please pro	48706		\$ <u>00.</u> —	\$
	•		Click Here for	or Memo Itemization
	Employer			
Type of Contribution: Direct	Loop from a	Fund Bainer		
3. Contribution #2 PAC Receipt?	Loan from a person		·	
Name & Address	<u></u> !	of Receipt 9 (12) of		
Kloka, Rache 602 N. Warn	1			j
602 N Warn	er		*30°00	\$
Bay City, MI 4 5. If over \$100.00 cumulative, please pro	8706			
		•	Click Here fo	or Memo Itemization
Occupation	_ Employer			
Business Address		K-21		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? Name & Address:	-	of Receipt 10 2 08		
Wagner, Greg 300 Pine Essexville, N	1. 118722		<u>\$ 25.00</u>	\$
5. If over \$100.00 cumulative, please pro			Click Here for	Memo Itemization
			\$10.00 B	Fundraiser
Occupation	Employer		\$15.00	
Business Address Type of Contribution: \times Direct	Loan from a person	Fund Raiser		
		of Receipt 10 2 08		
Steinhoff, J	<u>oanne</u>			
301 State St	F.		s 10.00	30.00
Steinhoff, J 301 State St Bay City, MI	48706		Ψ	\$
5. If over \$100.00 cumulative, please pro-	vide:		Click Here for	Memo Itemization
Occupation	_ Employer			
Business Address				٠
Type of Contribution: Direct	Loan from a person	Fund Raiser		
		Page Subtotal	135.00	
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1, Committee I.D. Number	1909	10			
The Commi	. 1		A A .12	0.5	r
Committee Name	<u>ਾ</u>	blect	MIKE	Rivard	łΰ

	6. Amount 7. Cumulative for Road
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9 12 108	
Name & Address: The Committe to Elect Mike Rivard for Roads	
940 N. Garfield Rd	
	s40.00 s
Linwood, MI 481134	3
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person X Fund Raiser	1
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/02/08 Name & Address	
Niemann. Tom	
Niemann, Tom 4058 Allen Ct.	s 10.00 s 30.00
Bay City, MI 48706	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 1000	
Werth, Jeanne 900 Germania Ave	
900 Germania Ave	\$ 10.00 \$ 90.00
Bay City, M1 48706	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person X Fund Raiser	·
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10 02 03	
Harnden, Mark	
3753 Galfield	\$10.00 \$30.00
Harnden, Mark 3753 Gartield Auburn, MI 48611	\$ 10.
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
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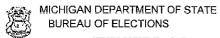
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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

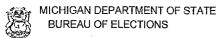
1. Committee I.D. Number 150510
The Committee to Elect Mike Rivard for 2. Committee Name

Roads Enter contributor's name and address. If contribution is from an individual, enter last name, first name. 6. Amount Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? 4. Date of Receipt 10 02 08 Name & Address: Carruthers, Ladeema 141 E Herman Augres, MI 48703 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization \$10.00 Fundraiser Occupation Employer_ Business Address X Direct Type of Contribution: Fund Raiser Loan from a person 3. Contribution #2 PAC Receipt? 4. Date of Receipt Name & Address Kawolski, Matthew 1603 Cass Ave. Bay City, MI 48708
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer, Occupation . Business Address Type of Contribution: Direct Fund Raiser Loan from a person 3. Contribution #3 PAC Receipt? 4. Date of Receipt Name & Address: Bay Gety, M1 48706 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Employer_ **Business Address** Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? 4. Date of Receipt Name & Address Niemann, Rich & Lois Richlyn 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_ Employer Business Address _ Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on line 3a of Summary



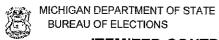
1. Committee I.D. Number _	150510	
The Committee Name	tee to Elect	Mike Rivard

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 10102108 Rivard Marie		
1947 Bentley Rd Bentley, MI 48613 5. If over \$100.00 cumulative, please provide:	\$ 10.00	€30.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		, mono komzaton
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10102108 Name & Address		
Rivard, Robert + Suzanne		
1498 W. Anderson Rd	\$20.00	\$60.00
Linwood, MI 48634		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 100208		
Nagy, Vickie 1835 EN Bowtell	:25,00	\$95.00
Linwood, MI 48634	Click Horo for	Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Here for	Weno temization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 100208		
Kloka, Rachel 602 N. Warner	- 4-	
BOUN WATTER	\$10.00	\$30.60
Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:		
5. II Over \$100.00 cumulative, piease provide.	Click Here for	Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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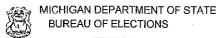
1. Committee I.D. Number	100010	
The Committee Name	tee to Elect	Mike Rivard

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 100208 Name & Address:		
Obermiller, Abbie		
840 N. Garfield Rd	\$10.00	2000
LINWOOD, MI 48634 5. If over \$100.00 cumulative, please provide:	\$10	\$ <u>00.</u>
	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser	<u> </u>	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 100208 Name & Address		·
Escomilla, Sarah	\$10.00	
abert Coggins Ra	\$10.	\$
Escomilla, Sarah 2061 E. Coggins Rd Pinconning, MI 48650 5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/02/08 Name & Address: Rivard, Andy 944 Saganing Bentley, MI 48613	\$[D.00	\$
Bentley, MI 48613 5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 1008		
Cronk, Kip 205 E. Fisher Bay City, M. 48706 5. If over \$100.00 cumulative, please provide:	\$10.00	\$
Occupation Employer	Click Here for	Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
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1. Committee I.D. Number 1505	10
The Committee to	Elect Mike Rivar
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		for Roa
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 100208 Name & Address: Van Sumeran Nina 889 Shady Shore Bay Lity Mi 48706 5. If over \$100.00 cumulative, please provide:	\$10.00	s 30.00
Occupation Employer	Click Here is	or Memo Itemization
Business Address		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/02/08		
Name & Address Simstad, Marci 3318 Broadmore Dr Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:	\$ (O . O O .	s 30.00
Occupation Employer		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		į
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/02/08 NIEDLER, Nelson 5402 Elmview Dv. Bay City, MI 48706 5. If over \$100.00 cumulative, please provide:	\$ 10.00 Click Here for	s 65.0℃ Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/02/08 Name & Address Gromaski, Richard 2075 E. Coggins Pincenning, Ni 48650	\$10.00	\$
Finconning, NY 48650 5. If over \$100.00 cumulative, please provide:		*
Occupation Employer	Click Here for	Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		·
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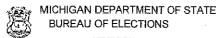


CANDIDATE COMMITTEE

1. Committee I.D. Number 150510

The Committee to Elect Mike Rivard for Roads

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5/28/08	date of receipt)
Name & Address: US 0107)	
radio dy fadroos.	•
Bay County Republican Party Bay City, MI 48706	- 00°
Day ary, MT 40706	<u>s +00:-</u> s
5. If over \$100.00 cumulative, please provide:	Click Horo for Marra Hamiration
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	_
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt	
Name & Address	
	\$ \$_
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	_
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	
Name & Address:	<u> </u>
	\$ \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
OccupationEmployer	_
Business Address	_
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address	
	\$ \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	Chek Here for Metrio Remization
Business Address	-
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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number	<u> 150510</u>	
The Committee Name	tecto Bled Mike K	Zivard for
		Roads

-Page:

2. Committee Name		17.
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 10/02/08 Name & Address: Pagnier, Art+Millie 113 Darley Avenue Aubum, MI 48611 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	s 20.00 Click Here fo	\$or Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		•
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/02/08 Name & Address Duranczy K, Fran K 628 Oakwood Pinconning, MI 48650	\$10.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 100008	<u>-</u>	
Duranczyk, Mike 710 Burmuda Ct.	\$ 10.00	\$
Pinconning, MI 48650 5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10 02 08		
The Committee to Elect Mike Rivard for 840 N. Garfield Rd Roads Linwood, MI 48634 5. If over \$100.00 cumulative, please provide:	£30. <u>∞</u>	\$
	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	60.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	2265,00
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ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

1. Committee I.D. Number_	150510		<u> </u>
The Lemmit 2. Committee Name	tee to Elect	MIKE	Kivalo

		2. Committee Name
3. Name & Address From Whom Received	Date of Receipt	5. Type of Receipt 6. Amount
Receipt #1 Name & Address:	Date of Receipt 9 15 08	Loan from a Lending Institution
Name & Address: City of Bay City 301 Washington Bay City M1 48706		Interest \$ 50.00
301 Washington	1 Ave	Refund \Rebate Click for Memo Itemization Type
Bay City MI 48706	<u></u>	Deposit for
, ,	X Fund Raiser	Other (Specify) Pavillion Renta
Receipt #2 Name & Address:	Date of Receipt 9 15 08	Loan from a Lending Institution
Bosco Food Si 407 Eleventh	ervice Inc	□ Interest \$ 33.50
		Refund \Rebate Click for Memo Itemization Type
Bay City MI 48		Other (Specify) Return
	Fund Raiser	L Clurry
Receipt #3 Name & Address:	Date of Receipt	Loan from a Lending Institution
·		Interest \$
		Refund \Rebate Click for Memo Itemization Type
· 	Fund Raiser	Other (Specify)
	Date of Receipt	Loan from a Lending Institution
Name & Address:		\$
		Interest Refund \Rebate Click for Memo Itemization Type
		<u></u>
	Fund Raiser	Other (Specify)
Receipt #5 E Name & Address:	Pate of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
	te of Receipt	Loan from a Lending Institution
Name & Address:		
•		Interest
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #7 Da Name & Address:	te of Receipt	Loan from a Lending Institution
		Interest
·		Click for Memo Itemization Type
Г	Fund Raiser	Other (Specify)
) UHU IVAISEI	Page Subtotal 8257
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,		line 4 of Summary



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK CANDIDATE COMMITTEE

1. Committee I. D. Number 150510

The Committee to Elect Mike Rivard for Roads

<u> </u>		
Name and Address from whom received If contribution is from an individual, enter last	Type of In-Kind Contribution (Check applicable box)	7. Amount or 8. Cumulative
name first. Check box to indicate if contribution	5. Date of Receipt	Fair Market for Election Value Cycle (Through
is from a Political Committee or an Independent	6. Name & Address of Vendor from whom goods or services were	Value Cycle (Through date in Item 5)
Committee (Both are commonly called PACs). Report all in-kind contributions.	purchased	auto in nom of
	4 D Enthum 1 . 0	<u> </u>
Contribution #1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address:	Goods Donated or Loaned Services Donated	00
Niederer, Nelson+Jodi	Goods or Services Purchased by Candidate or Others	35.00
5402 Elmview Dr.	-	
Bay City, M1 48706	Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide: Occupation:	Description Pop + Ice for Fundraise	w
Employer Name & Business Address:	5. Date Of Receipt: 9112/08	
	6. Vendor Name & Address:	
	Clic	k Here for Memo Itemization
VZ - 15: 0 (1) "		
Fund Raiser Contribution		
Contribution #2 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address		·
	Goods Donated or Loaned Services Donated	·
	Goods or Services Purchased by Candidate or Others	\$
	Goods or Services Purchased by Candidate or Others- LOAN	
	David C	į
If over \$100.00 cumulative, please provide:	Description	
Occupation:	5. Date Of Receipt:	
Employer Name & Address:		
	6. Vendor Name & Address:	
	Clin	k Here for Memo Itemization
		KTIGIG IGI WEING REINZAUGH
Fund Raiser Contribution		
	, [7]	
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address:	Goods Donated or Loaned Services Donated \$	s
	Goods or Services Purchased by Candidate or Others	
•	Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide:	D 10	
Occupation:	Description	
•	5. Date Of Receipt:	
Employer Name & Address:	6. Vendor Name & Address:	
·		k Here for Memo Itemization
· 1	•	
Fund Raiser Contribution		
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ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number _	100010				
The Committee	to Elect	Mike	Rivard	for Ro	ads

OANDIDATE COMMITTEE 2.0	Committee Name	1100 1014	ara jur Roc
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1	·		
Name Staples Address 4021 N. Euclid Ave Bay Cety, MI 48706	Purpose: Ink Cartridges	08 Date	\$ 66.76
Sady sady in to rec	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			4
Name City of Bay City Address 301 Washington Ave Bay City, MI 48708	Purpose: Nett Office VIIII	Date ere for Memo	\$250.00
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Office Max 2272 Tittabawassee Rd Address Saginaw, Mi 48602	maryers.	8 3 1 0 8 Date Pere for Memo	\$ 10.34
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		:
Expenditure #4			
Name LOWE'S 2258 Tittabawassee Rd Address Saginaw, MI 48602	Purpose: <u>Sign Supplies</u>	3108 Date	\$ <u>45.50</u>
	Click He	re tor iviemo i	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name LOCAL 362 4427 E. Wilder Rd Address Bay City, MI 48706	Purpose: Rent on UAWHall For Fund raiser Click He Check box if this expenditure is payment of debt or obligation reported on previous	Date ore for Memo I	\$ <u>[OO</u> <u>OO</u> Itemization Type
X Fund Raiser	statement		
· .		Il this page	47260
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Page ____ of ___



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number	150510		
The Committee	e to Elect Mike	o Diand	forRoads

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1 Name GFS 3730 Wilder Rd Address Bay City, MI 48706 Fund Raiser	Purpose Fundratises Supples Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
Name 60500 Foods POBOX Address 407 Eleventh St. 547 Bay City, MI 48706	Purpose: Fundraiser Supplies Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure #3 Name Committee to Elect Mike Rivard for Roads Address 840 N. Garfield Rd Linwood, MI 48634 X Fund Raiser	Purpose: Tundraiser Tickets Date Formike tynn Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
Name Meats & Mooore 1411 S. Wenona St. Address Bay City, MI 48706	Fundraiser 9/13/08 \$700.00 Purpose: Profit Split Cost Click Here for Memo Itemization Type Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #5 Name Essexville Lions Club Address Essexville, MI 48732 Fund Raiser	Purpose Benefit Dinner G1408 \$50.00 Tickets Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
	Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)

Page 2 of H

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 150510

The Committee to Elect Mike Rivard for 2. Committee Name Porch

			<u>KU</u>
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name WalMart -	Q	hullna	
3921 Wilder Rd		114100	\$10.18
Name Wal Mart 3921 Wilder Rd Address Bay City MI 48706	Purpose: Paint	Date	<u> </u>
Dayaty MI 40 TOG	3		•
* *	Click H	ere for Memo Ite	emization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #2			
Name Dave Shore for Supervisor 3309 State Street Address Bay City, MI 48706		lailne	in our
3309 Strub Sh.	tundraiser 4	Harles	\$40,50
Address Pro 1 At 1107	Purpose: Benefit Tickets	Date	
MI 48+06	i uiposc.		
·		ere for Memo Ite	emization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
•	•		
Name Service Signs + Screen 1605 Broadway Address Bay City, MI 48708		2122/20	
1605 Broadway	_ ,	1100100	\$534°°
Address Pay City MI LIRZO	Purpose: 51905	Date	Not were \$ 1
ing my, mi no rub			
•	Click He	ere for Memo Ite	mization Type
	Check box if this expenditure is payment of		•
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name Committee to Elect Mike		-1-1-5	
Offinition to order risk		<u> 0[2]0</u> 8	\$20,00
Rivard for Roads Address 840 N. Garfield Rd	Purpose: Fundraiser Tickets	Date	* <u>au. —</u>
AUGIESS 940 N. Garfield RA	Purpose. Orici al Der		
limited the till mit	11CKets		
Linwood, MI 48634	Click He	ere for Memo Ite	mization Type
	Check box if this expenditure is payment of		į
Fund Raiser	debt or obligation reported on previous		
L/J Fund Kaiser	statement		
Expenditure #5			
Name Third Street Deli	, ·	, 1 -	
20/2 Mable Streat (MIZ)	tundraiser 1	013108	157,00
Address Display Street Child	Fundraiser 1 Purpose Profit SplitCost	Date	»10U, _
Name Third Street Deli 306 Mable Street (MI3) Address Pinconning, MI 48750	i aipooci		
)	Click He	ere for Memo Ite	mization Type
	Check box if this expenditure is payment of		"
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	debt or obligation reported on previous		
Fund Raiser	statement		
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SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 150516

The Committee to Elect Mike Rivard for

CANDIDATE COMMITTEE 2.0	Committee Name	PUR	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Rotary International		0 15 08	\$120.00
Address Bay City, MI 48708	Purpose: Benefit Dinner tickets	Date	
	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Shirts Mugs+More 2911 Center Ave. Address Essexville, MI 48732	Purpose: Pin5	<u>D 15 08</u> Date	\$ <u>13.7</u> 2
• 	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Rotary of Bay City		0/16/03	3 \$ <u>63.</u> ∞
Address Bay City, MI 48706	Purpose: Denet it Donation	Date	temization Type
		20 201 INDING	
Fund Raiser	L_Check box if this expenditure is payment of debt or obligation reported on previous		
<u> </u>	statement		
Expenditure #4			
Name Wal Mart	1	alielas	,
3921 Wilder Rd Address Bay City, MI 48706	Purpose: Photos	Date	° \$63.81
	Click He	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Wal Mart			
Name Wal Mart 3921 Wilder Rd Address Bay City, MI 48706	Purpose and Stock Paper	019/08 Date	\$ <u>5.81</u>
•	Click He	ere for Memo '	temization Type
•	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subtota	al this page	265.34
	Grand Total of all So (Complete on last page of		2397.75

Enter this total on line 8a of Summary Page

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FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number	150570		
The Committee Name itte	ce to Elect Miko	Rivard for	Road

2. Committee Name ittee to Elect Miko Rivard for				
	- USE A SEPARATE SH	EET FOR EACH EVENT	-	
3. Date Event Was Held September 12, 2008	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity Pig Roast Dinner	6. Address and Name (If any) of the place where the activity was held. Vet's Park Pavilli Kennedy Drive Day City, Mi 4871 Private Residence	
7. Total Contributions	1180.00	<u>.</u>		
8. Other Receipts	00.5			
9. Gross Receipts (Add lines 7 a	and 8) 1262.54	<u>?</u>	•	
10. Total Cost of Event (Total Cost includes In-Kind Cor	ntributions and All Expenditures	Made For the Event)		
11. Check if event was a joi	int fund raiser and complete the	e following:		
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)	
		·		
			· .	
	· .			
-				
period covered by the C Receipts and expenditur Schedule (1A), Itemized Summary Page.	ed to file a separate Fund Raise ampaign Statement. res listed on a Fund Raiser Sch In-Kind Contributions Schedul rticipated in a joint fund raiser n	nedule must also be reported o e (1-IK), Itemized Expenditure	on the Itemized Contributions s Schedule (1B) and the	



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 150510

The Committee to Elect Mike Rivard For Roads

		· · · · · · · · · · · · · · · · · · ·	Road
	- USE A SEPARATE S	HEET FOR EACH EV	ENT -
Date Event Was Held) ctober 2,200	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Acti	6. Address and Name (If any) of the place where the activity was held. Third Sheet Deli 305 5. Mable Street Bay City, Mile Private Residence
Fotal Contributions	_300.	00	
Other Receipts			
Gross Receipts (Add lines 7 a	nd 8) <u>300.00</u>	·	
Total Cost of Event tal Cost includes In-Kind Con	170.00 tributions and All Expenditu		
Check if event was a join	nt fund raiser and complete t	the following:	·
Co-Sponsor(s)	Contribution (%)	ո Split	Expenditure Split (%)
		· .	
	·		
		<u></u> .	·

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number 150510

CANDIDATE COMMITTEE

The Committee to Elect Mike Rivard for 2. Committee Name

This Schedule itemizes:					
a Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)					
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt #1 Corp? Yes Owed to or by: Michael G. Rivard 840 N. Garfield Rd Linwood, MI 48634 If bank loan, name of endorser or quarantor:	4. Type Oan to Committee 5. Date Debt Was Incurred: 6. Original Amount of Debt: \$3000.00	\$ \$ \$ \$	\$	\$FORGIVEN	
	ī .	Amo	ount Endorsed: \$	1	
Debt #2 Corp? Yes Owed to or by: If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$ 4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> :	\$ \$ \$ \$ \$ \$ Am \$ \$ \$ \$ \$ \$ \$	sount Endorsed: \$_	\$FORGIVEN	
	\$	\$		FORGIVEN	
If bank loan, name of endorser or guarantor:			nount Endorsed: \$_	·	
Page Subtotal (Outstanding debt) Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement. Page of					